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Bib Data Sheet

CONFIRMATION NO. 1093

|   |   |                               |   |  |                                |
|---|---|-------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/974,923  | <b>FILING DATE</b><br>10/10/2001<br><b>RULE</b>   | <b>CLASS</b><br>713           | <b>GROUP ART UNIT</b><br>2131   | <b>ATTORNEY DOCKET NO.</b><br>INTL-0667-US<br>(P12985) |                                |
| <b>APPLICANTS</b><br>Kelan C. Silvester, Portland, OR;<br><br><b>** CONTINUING DATA *****</b><br><br><b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 11/09/2001</b>  |   |                               |   |  |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>OR | <b>SHEETS DRAWING</b><br>3  | <b>TOTAL CLAIMS</b><br>29                              | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>Timothy N. Trop<br>TROP, PRUNER & HU, P.C.<br>STE 100<br>8554 KATY FWY<br>HOUSTON, TX 77024-1805  |   |                               |   |  |                                |
| <b>TITLE</b><br>Using a communication protocol to provide security services   |   |                               |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>902   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |